

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>HAL034093</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: <b>01</b>  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>04/09/2015</b>
NAME OF PROVIDER OR SUPPLIER  <b>DANBY HOUSE</b>		STREET ADDRESS, CITY, STATE, ZIP CODE <b>3150 BURKE MILL ROAD WINSTON SALEM, NC 27103</b>		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
C 000	Initial Comments  Report of Biennial Construction Survey by Dennis Harrell and Bob Getchell on 4-9-2015.  Records indicate the Carolina and Salem Wings were completed in 1980 and are not sprinkler protected. That portion of the facility must meet the 1977 Rules, the applicable portions of the 2005 Rules for the Licensing of Adult Care Homes, and the 1978 North Carolina State Building Code, Section 409, Institutional Occupancy. The Piedmont and Winston Wings, along with the Special Care Unit was first licensed or submitted on 7-30-1998. Therefore that part of the facility must meet the 1996 Rules, the applicable portions of the 2005 Rules for the Licensing of Adult Care Homes, and, the 1996 North Carolina State Building Code, section 409, Institutional Occupancy. The facility is licensed for 100 beds total with 48 in a Special Care Unit.	C 000		
C 166	Housekeeping-Maintained Free of Hazards  SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS (a) Adult care homes shall: (5) be maintained in an uncluttered, clean and orderly manner, free of all obstructions and hazards; (e) This Rule shall apply to new and existing facilities.  This Rule is not met as evidenced by: 1. Based on observation, an exterior exit path was not maintained uncluttered and free of obstructions. Findings include; There was an above ground 4 inch drain pipe extending entirely across the exit path from the	C 166		

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

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C 166	Continued From page 1  exit on Entry Hall.  2. Based on Observation, the building was not maintained in a safe manner by not properly handling portable medical oxygen cylinders. This could affect all residents, staff and visitors if cylinders fall, breaking their valves, propelling the cylinder and turning it into a dangerous projectile. Findings include: A large portable medical oxygen cylinder was stored in no container in the storage closet near room 115.  3. Based on observation the toilet in the bath off room 208 was loosely mounted to the floor. Loose toilets can cause leaking and/or fall hazards.	C 166		
C 189	Building Equipment Maintained Safe, Operating  SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS (a) The building and all fire safety, electrical, mechanical, and plumbing equipment in an adult care home shall be maintained in a safe and operating condition. (k) This Rule shall apply to new and existing facilities with the exception of Paragraph (e) which shall not apply to existing facilities.  This Rule is not met as evidenced by: 1. Based on observation, a ceiling mounted alarm light indicated the duct mounted smoke detector in the attic above Piedmont Hall was in an alarm condition. The fire alarm system was satisfied and showed no alarm condition, indicating a faulty indicator light or a faulty duct	C 189		

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C 189	Continued From page 2  smoke detector. Fire alarm equipment that indicates a malfunction may not sound an alarm in a real fire situation.  2. Based on observation the required one-hour fire rated walls and/or ceilings were compromised in several locations. Holes and penetrations that are not sealed with materials approved for use in one-hour fire rated construction and inoperable or missing ceiling radiation dampers present the possibility that a fire that begins in one space can quickly spread to other areas of the facility. Findings include: a. The exterior porch ceiling at the end of Carolina Wing was of combustible plywood approximately 6 feet wide by 5 feet deep. b. The exterior porch ceiling at the end of Salem Wing was of combustible plywood approximately 6 feet wide by 5 feet deep. c. Hole in the attic smoke barrier wall separating the kitchen wing from the rest of the facility. d. Unsealed penetrations through the attic smoke barrier wall above Salem Wing. e. Unsealed penetrations through the attic fire wall separating the old and new portions of the facility. f. Unsealed penetrations through the attic smoke barrier wall above Piedmont Wing. g. Hole in wall behind dryer. h. Unsealed penetrations through ceiling and wall in the janitor's closet at the nurse station. i. Flexible duct collapsed on ceiling radiation damper in corridor near Assisted Living Back Entry. j. Four ceiling supply vents in central Entry Hall not protected with ceiling radiation dampers. k. Heat detector not properly mounted to ceiling in room 204. l. Hole in ceiling in the Activity room in Special Care.	C 189		

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C 189	<p>Continued From page 3</p> <p>m. The sprinkler escutcheon was missing or not tightly fitted to the ceiling complete the one-hour protection in the corridor near room 225.</p> <p>n. Ceiling radiation damper very dirty in the exhaust in the bathroom off room 222.</p> <p>o. Ceiling radiation damper very dirty in the return in the clean linen room.</p> <p>p. Ceiling damaged from a leak in the corridor at room 104.</p> <p>q. Combustible plywood patch on wall in laundry.</p> <p>r. Unsealed conduit sleeves (2) in the mechanical room.</p> <p>3. Based on observation, the ¾ hour fire rated door from the corridor to the clean linen room is part of the required 1 hour fire separation of the laundry and could not be closed because of a table in the way. Failure to maintain the required fire separation could allow a fire that begins in the laundry to quickly spread to the corridor preventing evacuation. The table was removed during the survey.</p> <p>4. Based on observation, the battery powered emergency lights numbered 6 and 10 would not work when tested. Battery powered emergency lights that will not work properly for at least 90 minutes could endanger the residents and staff.</p> <p>5. Based on observation the access doors for the sampling tubes on the duct mounted smoke detectors in the attic were installed too far away from the sampling tubes to allow access for inspection and cleaning. Sampling tubes that are not periodically inspected and cleaned may cause the duct detector to not work properly in the event of a fire.</p> <p>6. Based on observation, there is excessive lint build-up on the sprinkler head in room 204.</p>	C 189		

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C 189	<p>Continued From page 4</p> <p>Excessive lint could prevent the sprinkler from working properly in a fire.</p> <p>7. Based on observation, some corridor doors are not closing well and/or latching to resist the passage of fire and smoke. Corridor doors that do not close completely and latch present the possibility that a fire that begins in one space can quickly spread to the corridor and the remainder of the facility. Findings include; a. The door to the Spa will not latch when closed. b. Hole through the door to the small bath near room 116.</p> <p>8. Based on observation, a conduit is broken exposing the electrical wires at a loose junction box in the attic over the kitchen. Exposed wiring can be a fire hazard.</p> <p>9. Based on observation, a junction box cover is missing exposing the electrical wires in the sprinkler riser room. Exposed wiring can be a fire hazard.</p> <p>10. Based on observation, there is an open 2 inch sewer vent pipe in the attic above the kitchen. Open vent pipes can allow combustible gases and harmful bacteria to enter the attic.</p> <p>11. Based on observation, the exit light near room 225 will not work on battery back-up. Exit lights that will not work in a power outage could delay an evacuation in an emergency.</p> <p>12. Based on observation, the toilet will not flush in the bath off room 204. Toilets that don't flush properly can be a health hazard.</p>	C 189		

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C 199	Continued From page 5	C 199		
C 199	Exhaust Ventilation  SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS (g) The spaces listed in this Paragraph shall be provided with exhaust ventilation at the rate of two cubic feet per minute per square foot. This requirement does not apply to facilities licensed before April 1, 1984, with natural ventilation in these specified spaces: (1) soiled linen storage; (2) soil utility room; (3) bathrooms and toilet rooms; (4) housekeeping closets; and (5) laundry area. (k) This Rule shall apply to new and existing facilities with the exception of Paragraph (e) which shall not apply to existing facilities.  This Rule is not met as evidenced by: Based on observation the facility failed to maintain required exhaust in a working condition. Non-functioning exhaust could cause an unhealthy buildup of moisture and possibly bacteria. Findings include; The exhaust fans were not working in the bathrooms off rooms 112 and 123.	C 199		
C 147	Corridors-Free Of Equipment & Obstructions  IV. The Building C. Physical Environment (10 NCAC 42D .1503) 7. The requirements for corridors are: d. Corridors must be free of all equipment and other obstructions.  This Rule is not met as evidenced by:	C 147		

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C 147	Continued From page 6  Based on observation, the facility failed to maintain an exit corridor free of obstructions. Findings include; One corridor in Special Care exits through a Sun Room. The door from the corridor to the Sun Room was equipped with a lock that would prevent entry into the Sun Room and therefore prevent exiting in that direction. The lock was removed during the survey.	C 147		
C 153	Soil Utility Room  IV. The Building C. Physical Environment (10 NCAC 42D .1503) 10. Soil Utility Room A separate room must be provided and equipped for the cleaning and sanitizing of bed pans and must have handwashing facilities.  This Rule is not met as evidenced by: Based on observation, the hoppers have been removed in both soiled utility rooms. Please describe how you will comply with the Rule above.	C 153		